

# TANZANIA HUMAN RESOURCES CAPACITY PROJECT

HUMAN RESOURCES MANAGEMENT DISTRICT STRENGTHENING INITIATIVE:

REPORT OF THE COACHING AND MENTORING VISITS

IRINGA, MTWARA, AND LINDI REGIONS



## **LIST OF ACRONYMS/ABBREVIATIONS**

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ACO	Assistant Clinical Officer
AMO	Assistant Medical Doctor
AMREF	African Medical and Research Foundation
ANO	Assistant Nursing Officer
CHAI	Clinton Health Access Initiative
CO	Clinical Officer
CoCoDA	Companion Community Development Alternatives
COTC	Clinical Officers Training Center
CPD	Continuing Professional Development
CSSC	Christian Social Services Commission
CUAMM	Doctors with Africa Cuamm
DC	District Council
DDH	District Designated Hospital
DED	District Executive Director
DHRO	District Human Resource Officer
DHS	District Medical Officer
DMO	District Medical Officer
EGPAF	Elizabeth Glaser Pediatric AIDS Foundation
FHI	Family Health International
FY	Financial Year
HC	Health Centre
HCW	Health Care Workers
HF	Health Facility
HR	Human Resources
HRIS	Human Resource Information System
IH	IntraHealth International
JDs	Job Descriptions
LGAs	Local Government Authority
MC	Municipal Council
MD	Medical Doctor
MOI	Medical Officer In-charge
PHCI	Primary Health Care Institute
PMORALG	Prime Minister's Office Regional Administration and Local Government
POPSM	President's Office Public Service Management
PSI	Population Services International
RCH	Rural Health Clinics
RHMT	Regional Health Management Team
SST	Supportive Supervision Tool
THRP	Tanzania Human Resource Capacity Building Project
TPSC	Tanzania Public Service College
UNICEF	United Nations Children's Fund
USAID	United States Agency for International Development
WCI	Work Climate Initiative

## **INTRODUCTION**

In August 2010, BMAF in collaboration with the MOHSW conducted HRM district strengthening training as part of the THRP to all Local Government Authorities in Iringa, Mtwara and Lindi regions. The main goal of the training was to improve HRM practices on the mentioned HRM functions at the district level in a sustainable manner by ensuring that the team develop HRM action plans during the trainings and their plans are integrated into the respective Comprehensive Council Health Plans (CCHPs) for the financial year 2011/12 so as to enhance institutionalization and financing of HRH activities by the Councils

The above training was followed by a coaching and mentoring exercise to the 20 districts in Mtwara, Lindi and Iringa in Feb/March 2011. The main aim of the exercise was to provide further on site support in enhancing performance improvement on HRM practices at the district level. This included, identification of progress made after the HRM training, challenges and ways of improving the situation for improved health service delivery.

In September/October 2011, BMAF in collaboration with government officials from PO-PSM, TPSC, Local Government authorities and other stakeholders conducted the second coaching and mentoring exercise in the same district to review progress made since march 2010, build capacity to CHMTs on the identified gaps and collect data on various HRM interventions.

## **SPECIFIC OBJECTIVES OF THE SECOND COACHING AND MENTORING VISIT**

- To review and guide CHMTs on the preparation of the performance contract for FY 2011/2012 in the Open Performance Review and Appraisal (OPRA) from
- Review commitments made during the HRM training and the first coaching exercise
- Assess the usage HRM supportive supervision tool and Orientation package
- Assess the implementation of HRM action plan and the extent of incorporation into 2011/12 CCHP
- Provide on job capacity building on any other HRM gaps

## **METHODOLOGY USED:**

- The CHMT teams were informed 2 weeks before about the visit and information required during visits were mentioned in advance
- Focus group discussion using a developed coaching and mentoring checklist (see appendix i)
- Group/consultative discussions with the DHRO, DPLO, CHMTs and Co-opted members
- Photos were taken to show some of the improved working environment
- Documentary review -Relevant documents/reports were reviewed such as OPRAS forms, supportive supervision reports, developed action plans and the 2010/11 and the approved 2011/12 CCHPs

## **COACHING TEAM**

The team consisted of 2-3 participants who were among the trainers of the HRM district strengthening training and OPRAS experts from President's Office – Public Service Management (PO-PSM) and Tanzania Public Service College (TPSC).

### **Main focus areas for support included:**

- The status of OPRAS implementation including comprehensiveness/correctness, usage, challenges encountered and guiding team to set annual performance targets
- The extent of incorporation of HRH action plans into approved 2011/12 CCHP
- Funding of HRM activities from Government and other Stakeholders (with exclusion of PE)
- District staffing trend (staff availability and requested Vs posted and reported in 2010/11 and the requested 2011/12). Also the tracking of the posted health staff. The information from hospital, health centre and dispensary levels including challenges and actions being taken
- Tracing the trends of the HRH supportive supervision after the training in July 2010. Challenges and action being taken to overcome the challenges
- The team also looked into the orientation practice of newly employed staff after the training in July/August 2010
- Identifying and observing the Work Climate Initiatives at the district

## **SUMMARY OF RESULTS**

### **General Observations**

- Generally all 20 districts incorporated HRM action plans into 2011/12 approved CCHP as indicated on fig. 1. The average percentage inclusion of HRM activities into CCHP is 40%. The major variance from year 2010/11 was due the lower budget ceiling provided by the government and removal of all training in the district plans that was instructed by MoHSW. However, despite reduction of budgets, there was an increase of HRM activities by more than 50%. New HRM activities observed were the orientation, dissemination and refresher staff orientation on Job descriptions, local incentives, work climate, staff meetings and OPRAS. Most of these new activities required minimal funding, which is the cost effective approach in improving HRM practices at the district level.
- CHMTs and HMTs were facilitated to fill OPRAS forms for 2011/2012 in all 20 Districts as shown on fig. 3. All targeted eight members in each district were able to review the OPRAS forms and fill correctly as per guideline. This intervention has increase number of staff who set annual performance targets through OPRAS from 50% to 85% compared to year 2010/2011

- Supportive supervision activity has been carried out in all councils on quarterly basis through the normal supportive supervision plan. However, only few districts were able to use the HRM supportive supervision checklist. The main reasons given included time limitation to administer two components comprehensively (service delivery and HRM) as provided separately by the two checklists. Also lack of official communication from the parent ministry on using the revised supportive supervision guideline. The coaching team were able to review some of the supervision reports and identify HRM interventions which were supported; These were on job trainings, OPRAS, task reallocation and introduction of the new tasks such as outreach programs.
- There has been some work climate initiatives that were on going in the districts such as renovation of staff houses and office buildings in almost 60% of the districts. Advance salary is provided to all staff who are awaiting to be entered in the payroll across 20 districts, while household materials such as bed and mattress are provided in Mtwara DC for the new recruits
- Routine orientation of new staff has been taking place in all 20 councils. Districts have been able to orient staff using items in the HRH orientation package such as planning for the office space or location, provision of job descriptions and preparation of staff houses which are owned by the districts or assist the new recruit to get rental houses. However, there is need to encourage the districts to use more of the orientation package as this was the main purpose of developing the package to improve motivation, retention and productivity.
- All councils were able to provide data on staffing trend for 2010/11 and 2011/12 that indicate significant improvement on number of staff posted, reported and retained as indicated on fig. 2. Districts have an average of retention of reported staff by 85% which is due to provision of incentives to new recruits such as free transport to the posted facilities within the districts, provision of staff loans, advance salary if monthly salary delays and housing in some facilities

## **CHALLENGES**

- All 20 districts were not able to complete 2011/12 CCHP on time due to back and forth comments from MoHSW and PMO-RALG as a result most of data were either not available or at a draft stage during coaching and mentoring visits. Most districts completed their CCHP in November/December 2012.
- Districts were not able to incorporate all HRM activities from their action plans into the 2011/12 CCHPs. This was expected due budget ceiling provided by the government and restriction provided by MOHSW not to include training activities into the 2011/12 CCHP, hence reduced the proportion percentage of inclusion of activities as per developed action plans.
- Time spent per district during supportive supervision (two hours) limit the number and intensity of technical support on the HR supportive supervision checklist

- The planning process is still at the district level with minimal involvement of the health facility in-charges. The plans are not shared with all the members of the CHMT and other staff who are the main implementers of the activities. This has an implication in planning and budgeting for HR issues. *“In some districts the CCHP documents are confidential”*.
- Despite the fact that, the DEDs received orientation on OPRAS at the national level, the importance and the filling of the OPRAS forms is still a challenge. Intensive follow-up is needed to establish the results of the orientation and the coaching exercise for improved use of the OPRAS system

### **Recommendations**

- Follow-up with all the councils to ensure the agreed HRH action plans priorities are integrated in the 2012/13 CCHP and are implemented
- Scale up coaching and mentoring of OPRAS to more staff to ensure increased understanding of the system
- CHMTs to sensitize heads of facilities on the use of the orientation package at the facility levels
- PMO-RALG should prepare circular letter to direct District councils on the use of the HRM supportive supervision tool
- Template for preparation of incentive package should be circulated to all Districts once finalised for use by the districts
- As most of the councils have local incentive package schemes, there is need to share these existing packages and their relevance during knowledge sharing forums
- Support the CHMT to ensure cascading of all HRM intervention to the lower level (Health centres and dispensaries)
- THRP to share with policy makers at the MOHSW & PNORALG the observation on financing of HRM activities, including late disbursement and quality of CCHP thus to promote more financing commitments on HRM activities and improve quality of CCHP. The project to promote more skills on the ways of increasing HRM activities that don't require funding such as orientation of new staff, OPRAS implementation and preparation of Job descriptions
- PO-MORLG and MOHSW to speed up the dialogue in addressing the differences and ensure harmonisation of the HRIS and HCMIS systems to effect smooth implementation at the district level
- To encourage the District and Municipal Councils to see the importance of involving respective stakeholders particularly those supporting HRM activities during the planning sessions to ensure both technical and financial support from them

- The MOHSW and District Councils should improve in the area of communication and sharing all new guidelines, tools, checklists related HRM issues with respective CHMTs, Head of facilities and other related bodies.
- THRP should build the capacity of the BMAF zonal offices and Zonal Resource Centres in conducting regular coaching and mentoring to the ongoing implementation the planned activities
- THRP to cooperate with WAJIBIKA mentors in planning sessions to promote more inclusion of HRM activities to the CCHP.

**SPECIFIC DISTRICT FINDINGS OF IRINGA, LINDI AND MTWARA REGIONS**

VISITED AREA	SUMMARY FINDINGS					
District	Review of the Developed action plan with CHMT and planning team	OPRAS	Staffing trend, Recruitment and retention	HRH Supportive Supervision	Work Climate Initiative	Orientation
KILOLO DC	<p>Kilolo district Council was able to integrate 77.7% of the developed HRM activities in the 2011/12 CCHP</p> <p>For the year 2010/11, HRM activities covered 33% taking about 17.6% of the total budget, while in 2011/12, HRM covered 13% taking a budget of 4.3%. The abrupt change is due to the removal of all training activities from the CCHP for the year 2011/12 (MOHSW directive)</p> <p>It was noted that, Council own sources does not contribute to HRM activities</p>	<p>CHMT received an orientation of OPRAS which was followed by setting of annual performance contracts</p> <p>4 CHMT members filled and signed OPRAS forms. Unfortunately other CHMT members were not available. DMO and DHS will scale down the knowledge to other CHMT and co-opted members and other staff.</p> <p>The district authority plans to cascade the knowledge to the lower cadre staff</p>	<p>The trend for 2011/12 is as follows: out of 74 approved posts, 49 have been posted and out of those 47 reported to the respective station. The retention rate is about 95.7%.</p>	<p>The district has been able to conduct only 2 supportive supervision visits. Main reasons provided was late disbursement of funds mainly for fuel</p> <p>The HRM supportive supervision tool was not available to all CHMT members. Some components of the tool have been used during the normal district supportive supervision exercises. The components includes task allocation, job descriptions and performance evaluations</p> <p>A copy of the HRM SS tool was provided to the DHS. However, the challenge was that, this is a parallel tool to the main one thus there is a need to harmonisation</p>	<p>There is clear signage system showing the different departments and offices at the district level.</p> <p>The district offices did consider issues of gender and disability. Special toilet facilities and walkways for disabled are available and separate toilets for male and female.</p> <p>However, one visited health facility of Kilolo H/C, the situation was not conducive. There is still no incineration system for disposing waste materials, water shortage particular at the toilets&amp; staff house. The labour ward had no toilet thus they use public toilet and according to supervision reports, there are inadequate working tools such as BP machines, no transport for referrals.</p>	<p>No comprehensive orientation of new recruited staff is being done. Only normal introductions are made to the health facilities and completion of relevant forms.</p> <p>Coaching teams oriented staff on the new orientation package</p> <p>Requested DHS to prepare orientation plan as per 2011/12 approved posts</p>



NJOMBE DC						
	Review of the Developed action plan with CHMT and planning team	OPRAS	Staffing trend, Recruitment and retention	HRH Supportive Supervision	Work Climate Initiative	Orientation
	<p>According to the analysis, Njombe DC have been able to incorporate 18.2% of the planned HRM activities into the 2011/12 CCHP</p> <p>Generally, HRM activities included in the 2010/11 were 44 (27.8%) out of the total activities and covered a budget of 4.5% out of the total budget. Similarly for 2011/12 CCHP, 11 (9.1) HRM activities out of all activities were included and allocated 4.4% of the total CCHP budget.</p> <p>Lower allocation of funding to HRM activities is due to inadequate ceiling to cover even other CCHP activities and removal of all training activities from the CCHP.</p>	<p>7 CHMT were oriented to fill OPRAS form. The knowledge obtained will be used to train other health staff on the operationalization of the system.</p>	<p>According to the staffing trend analysis, both in 2010/11 and 2011/12, there is a shortage of nurses and COs. This situation is being solved by placing the cadre who is available to be the in-charge of the health facility. There are no pharm techs at the health centre level. The district has made a request of 4 this financial year.</p> <p>out of 46 approved posts, 45 have been posted and all of them retained in the district</p>	<p>Supportive Supervision visits are made on quarterly basis using the normal tool. 3 visits have been made and 3 reports were shared &amp; reviewed by the team.</p> <p>The team identified the following HRM components supported during the S.S visits as Staff absconding from duty station without permission, bad language to patients, acquiring money without receipts). Reconciliation with village leaders was made, and was given stern warning.</p> <p>The district did not have the HRH supportive supervision tool</p>	<p>The work climate at the district offices is not conducive. There is one toilet shared by all staff. Acute problem of water threatens the health of all staff</p> <p>The offices are all congested. No adequate space. No storage facilities and all boxes are piled up in the offices.</p> <p>The district has acquired a second vehicle to support transport.</p> <p>The district council to consider renovation/construction of new offices. Unfortunately there are no such planned activities for the year 2011/12.</p>	<p>Components in the orientation package were used to orient new staff on the orientation. This included preparations of office space, housing and introductions to fellow staff</p> <p>Coaching teams oriented staff on the orientation package</p> <p>Requested DHS to prepare orientation plan as per 2011/12 approved posts</p> <p>No comprehensive orientation to new staff is made. The orientation package is not available. The district council is still using the unstructured way of orienting the new staff.</p>

IRINGA MC						
	Review of the Developed action plan with CHMT and planning team	OPRAS	Staffing trend, Recruitment and retention	HRH Supportive Supervision	Work Climate Initiative	Orientation
	<p>According to the analysis, Iringa MC have been able to incorporate 33.3% of the planned HRM activities into the 2011/12 CCHP</p> <p>HRM activities included in the 2010/11 were 40 (18.6%) out of the total activities and covered a budget of 4.1% out of the total budget. Similarly for 2011/12 CCHP, 34 (13.0%) HRM activities out of all activities were included and allocated 6.0% of the total CCHP budget.</p> <p>For the year 2011/12, cost sharing, has contributed to HRM activities (1.8 million)</p>	<p>Following the orientation of all DEDs on OPRAS, IMC did a tremendous work. During the visit, out of 203 staff, 180 have set their annual performance targets through OPRAS form (Swahili version) for 2011/12 m</p> <p>The facilitators oriented the CHMT on OPRAS as they needed to know more facts about OPRAS and how to fill the forms more correctly.. The members appreciated the input made.</p> <p>A total of 6 CHMT members set their annual targets by through OPRAS forms and signed by the Municipal doctor. (Municipal Council Doctor, MHS, MNO, Nutritionist, Assistant Dental Officer, Laboratory Technician,</p>	<p>The Municipal plans to construct its own hospital.</p> <p>Out of 24 approved posts, 23 were posted and retained in the 2010/11</p>	<p>Supportive Supervision visits were made on monthly basis using the normal tool. 6 visits have been made and 3 reports were shared to the team.</p> <p>The team shared 3 HRM issues (performance evaluation, ethics for the public service and WCI) supported by the CHMT.</p> <p>The Municipal has a schedule for supportive supervision indicating the dates, which facility and staff going for supervision.</p> <p>More copies for the HR supportive supervision were provided for dissemination to the team members and facilities</p>	<p>During the visit, the team appreciated , the completion of construction of the toilet facilities for male and female , unlike the poor condition of the toilets during the first coaching exercise.</p> <p>The council has completed construction of the Municipal OPD and Administration Block. Construction of two incinerators at Njiapanda and Kitwiru dispensaries have been completed.</p> <p>In order to address the issue of gender in the district, about 80% of the facility in-charges are female who qualify for the post.</p> <p>The council is organizing yearly meetings for all the staff. During the meetings, they reward the best health workers who have been identified by the workers themselves with 40,000/= each</p> <p>Health workers also receive extra duty allowances from the National Health Insurance</p>	<p>No comprehensive orientation of new recruited staff is being done. Only normal introductions are made to the health facilities.</p> <p>Coaching teams oriented staff on the new orientation package</p> <p>Requested DHS to prepare orientation plan as per 2011/12 approved posts</p>

MAKETE DC						
	Review of the Developed action plan with CHMT and planning team	OPRAS	Staffing trend, Recruitment and retention	HRH Supportive Supervision	Work Climate Initiative	Orientation
	<p>Incorporated some of the HRH plans into the CCHP of about 33% for 2010/11 and 31% for 2011/12</p> <p>Funding for HRM activities was 34% for 2010/11 and 17% for 2011/12</p> <p>The decline is due to Budget constraint which led to few activities to be incorporated into CCHP and Instruction to drop/remove all trainings for 2011/12</p>	<p>8 CHMT were oriented and filled OPRAS forms</p> <p>They were able to identify challenges and possible solution for OPRAS</p> <p>CHMT requested to cascade the knowledge to lower cadre staff in the district</p>	<p>The trend for 2011/12 is as follows: out of 86 approved posts, 61 have been posted and out of those 38 reported and 37 retained to the respective station. The retention rate is about 96%.</p> <p>Tracking of the posted health staff is done through phones</p> <p>Tracking tool developed by MoHSW not available and not in use</p> <p>Coaching team oriented CHMT on attraction and retention of staff</p>	<p>HRM supervision checklist in place and in use</p> <p>The district conduct Irregular supervision visits due to shortage of vehicles and inadequate funds for fuel</p> <p>HRM components supported included OPRAS, Job descriptions and ethics</p>	<p>Few activities have been incorporated in the CCHP such purchase of working tools and renovation of houses</p> <p>Coaching team oriented staff on the importance of this initiative on staff attraction, retention and productivity</p>	<p>Orientation to new staff is conducted with few components from the orientation package being used. They includes: introduction to fellow staff, provision of job descriptions and provision of relevant documents</p> <p>Coaching team oriented staff on the new orientation package</p>

LUDEWA DC						
	Review of the Developed action plan with CHMT and planning team	OPRAS	Staffing trend, Recruitment and retention	HRH Supportive Supervision	Work Climate Initiative	Orientation
	<p>Incorporated some of the HRH plans into the CCHP of about 17% for 2010/11 and 21% for 2011/12</p> <p>Budget constraint which led to few activities to be incorporated into CCHP</p> <p>Funding for HRM activities of 8.5% for 2010/11 and 18.7% for 2011/12</p>	<p>CHMTs were oriented to fill OPRAS forms.</p> <p>All of the CHMT members completed their annual performance contracts through OPRAS forms as per guideline issued by the team</p> <p>CHMT requested to cascade the knowledge to other staff as required by the Public Service Act, 2002</p>	<p>The trend for 2011/12 is as follows: out of 64 approved posts, 46 have been posted and out of those 25 reported and 24 retained to the respective station. The retention rate is about 96%.</p> <p>Tracking tool developed by MoHSW not available and not in use</p> <p>The posting letter does not have staff phone numbers hence difficult to track new staff</p>	<p>Irregular supervision visits due to shortage of vehicles and inadequate funds for fuel</p> <p>Inadequate supervision coordination of the supervision visits</p>	<p>Some activities of the WCI have been incorporated in the CCHP. This includes construction and renovation of staff houses, procurement of protective gears and other equipments for better service delivery</p> <p>There is budget for construction of staff houses and purchase of working tools such as protective gear</p>	<p>No comprehensive orientation of new recruited staff is being done. Only normal introductions are made to the health facilities.</p> <p>Team was orientated on the new orientation package</p> <p>Requested DHS to prepare orientation plan for new staff</p>

MUFINDI DISTRICT						
	Review of the Developed action plan with CHMT and planning team	OPRAS	Staffing trend, Recruitment and retention	HRH Supportive Supervision	Work Climate Initiative	Orientation
	<p>Incorporated some of the HRH plans into the CCHP of about 33% for 2010/11 and 27% for 2011/12</p> <p>Budget constraint which led to few activities to be incorporated into CCHP</p> <p>Funding for HRM activities of 33% for 2010/11 and 10% for 2011/12 this is due to Shortage of funds and Cut off the training activities</p>	<p>All CHMT were oriented and filled OPRAS forms</p> <p>They were able to identify possible solution for filling OPRAS form</p> <p>CHMT requested to cascade the knowledge to lower cadre staff in the district</p>	<p>The trend for 2011/12 is as follows: out of 36 approved posts, 35 have been posted and out of those 31 reported and 27 retained to the respective station.</p> <p>Tracking tool developed by MoHSW not available and not in use</p> <p>The posting letter does not have staff phone numbers hence difficult to track new staff</p>	<p>The normal Supportive supervision is being conducted in the district</p> <p>Irregular supervision visits due to shortage of vehicles and inadequate funds for fuel</p>	<p>Construction of staff houses and renovation of office have been incorporated in the CCHP. Fund have also set aside for purchase of various tools for effective performance</p>	<p>No comprehensive orientation of new recruited staff is being done. Only normal introductions are made to the health facilities.</p> <p>Team was orientated on the new orientation package</p> <p>Requested DHS to prepare orientation plan for new staff</p>

IRINGA DISTRICT						
	Review of the Developed action plan with CHMT and planning team	OPRAS	Staffing trend, Recruitment and retention	HRH Supportive Supervision	Work Climate Initiative	Orientation
	<p>Extent of incorporation of HRM activities for financial year 2010/11 was 11% while for 2011/12 was 10%</p> <p>The decrease was due to Inadequate funds to implement all proposed plans and removal of all training in the budget as instructed by MoHSW</p>	<p>CHMT members managed to fill the forms</p> <p>Requested to have sessions with heads of facilities and Dispensaries to fill OPRAS forms</p>	<p>The trend for 2011/12 is as follows: out of 58 approved posts, 84 have been posted and out of those 75 reported and 70 retained to the respective station.</p> <p>The number of posted is greater than those posted due to additional staff who requested to work in Iringa were allowed by the Ministry</p> <p>The District used telephone to track staff who have been posted</p>	<p>4 visits were conducted and 5 HRM activities were supported. The components includes: Ethics in the public service, Staff rules, OPRAS, planning, and orientation of new staff</p> <p>Since HRM supportive supervision tool seemed to be tool long, – it was advised to select areas to supervise while making follow up of the previous visit</p> <p>Inadequate transport- Team was advised to continue negotiating with DED’s office adhere to the supervision routes</p>	<p>There are some WCI activities in the approved CCHP such as budget for working tools such as gloves, furniture and renovation of staff houses</p>	<p>Some components in the orientation package have been used to orient new staff. They includes introductions to fellow staff members, briefing on the professional and public service ethics</p> <p>Teams were trained on all components of the orientation package</p>

TANDAHIMBA DC						
	Review of the Developed action plan with CHMT and planning team	OPRAS	Staffing trend, Recruitment and retention	HRH Supportive Supervision	Work Climate Initiative	Orientation
	<p>The developed actions plans were to be incorporated into 2011/2012 CCHP's and not into the CCHP 2010/2011 as the entire action plans were developed at the end of December 2010.</p> <p>The district incorporated 29% of the HRH action plans into the 2011/12 CCHP ( Two activities out of 7 activities</p> <p>Funding for HRM asctivities droped by 75% due to inadequated budget ceiling and removalk of all training by MoHSW</p>	<p>During coaching and mentoring visit 6 members of CHMT's were comprehensively trained on how to construct objectives to be SMART, cascading of the targets, the importance of adherence to performance management system etc, the examples of the filled OPRAS forms are available for references.</p> <p>CHMTs were advised to use the same knowledge to train others</p>	<p>Tandahimba DC still has staff shortage in all levels from Hospital level to Dispensary level, however it was noted that, the District did not request some of cadres especially those in degree levels as they fear staff won't accept the post. Cadres like Nursing Officers</p> <p>The trend for 2011/12 is as follows: out of 58 approved posts, 34 have been posted and out of those 30 reported and 29 retained to the respective station.</p>	<p>HR supportive supervisions were conducted in the routine districts supportive supervision sessions.</p> <p>Few HRM components were selected for follow up. They includes preparation of job description and task reallocation</p> <p>Report for Supportive supervision was made available to the team for reference</p> <p>Coaching team oriented CHMT on other components and requested the knowledge to be cascaded to other members</p>	<p>The hospital has a new OPD which has bigger space and easily accessible</p> <p>There is signage to direct different departments in the hospital</p> <p>WCI activities have been approved in the 2011/12 CCHP. They includes renovation of office, construction of staff houses and purchase of protective gears</p>	<p>The package have not been used to orient new staff</p> <p>The coaching team provided the copy and orient CHMT on how to orient staff as per new guideline</p>

NEWALA DC						
	Review of the Developed action plan with CHMT and planning team	OPRAS	Staffing trend, Recruitment and retention	HRH Supportive Supervision	Work Climate Initiative	Orientation
	<p>The district incorporated 22% of the HRH action plans into the 2011/12</p> <p>After analyzing Newala's 2010/2011 CCHP, it was found that a total of 294,434,690/= was invested in HRM activities, whereas in 2011/2012 a total of 363,697,600/= is excepting to fund 2011/0212 HRM activities which is almost 10 % increment</p>	<p>During coaching and mentoring visit all CHMT members were comprehensively trained on how to construct objectives to be SMART, cascading of the targets, the importance of adherence to performance management system etc, the examples of the filled OPRAS forms are available for references.</p>	<p>Newala DC still has staff shortage in all levels from Hospital level to Dispensary level. The staffing trend analysis is attached herewith for reference</p> <p>The trend for 2011/12 is as follows: out of 32 approved posts, 10 have been posted and out of those 7 reported and all of them have been retained to their respective location</p>	<p>HR supportive supervisions were conducted in the routine districts supportive supervision sessions. HRM components such as OPRAS and job description were supported by teams</p> <p>Report for Supportive supervision were made available to the team for reference</p>	<p>WCI activities have been incorporated in the CCHP.</p> <p>There is budget for construction of staff houses and purchase of working tools such as protective gears</p>	<p>Orientation to new staff is partially conducted as per the orientation package</p> <p>Teams were facilitated on the main components of the orientation package</p>



MWTARA DC						
	Review of the Developed action plan with CHMT and planning team	OPRAS	Staffing trend, Recruitment and retention	HRH Supportive Supervision	Work Climate Initiative	Orientation
	<p>Mtwara DC incorporated 13 HRH activities out of 157 ( 8 %) which are in the action plan. This was due to inadequate fund provided by the government and removal of all HRM training as instructed by the MoHSW</p> <p>Due to the above analysis, HRM funding decreased by 55%</p>	<p>CHMTs were oriented to fill OPRAS forms.</p> <p>All of the CHMTs members completed their annual performance contracts as per provided guideline</p> <p>CHMT requested to cascade the knowledge to other staff as required by the Public Service Act, 2002</p>	<p>The trend for 2011/12 is as follows: out of 93 approved post, 41 posted, 28 reported and 24 retained so far</p> <p>The District is in preparation of the localised incentive package for attracting and retaining staff in the District</p>	<p>HR supportive supervisions were conducted in the routine districts supportive supervision sessions.</p> <p>HRM activities supported includes OPRAS, rules and regulations in the public service and staff welfare</p> <p>Reports for Supportive supervision were made available to the team for reference</p>	<p>There is budget for renovation of staff houses and purchase of working tools such as protective gear</p>	<p>No comprehensive orientation of new recruited staff is being done. Only normal introductions are made to the health facilities, filling of forms and brief overview of the professional and public service ethics</p> <p>Coaching team oriented staff on the new package</p>

MTWARA MC						
	Review of the Developed action plan with CHMT and planning team	OPRAS	Staffing trend, Recruitment and retention	HRH Supportive Supervision	Work Climate Initiative	Orientation
	<p>The municipal has incorporated 18 HRM activities in the 2011/12 CCHP. This is the 15% of the total budget</p> <p>The above trend was due to removal of HRM training in the 2011/12 budget as instructed by MoHSW</p> <p>But some activities will be implemented through on job training that do not require funding such orientation, OPRAS etc</p>	<p>All CHMT members were oriented and filled the form properly</p> <p>Team were requested to share the knowledge to lower cadre staff so that all staff in the District be able to implement OPRAS in this financial year</p> <p>CHMT requested BMAF to provide further knowledge on conducting midyear and annual appraisal</p>	<p>Out of 3 approved post, none reported to the duty station</p> <p>Staff tracking was not effectively conducted</p> <p>Staff were oriented on staff tracking tool</p> <p>Localised incentive package will be prepared to attract staff in the District</p>	<p>HRH supportive supervision have been conducted in the normal municipal supportive supervision sessions</p> <p>Few components in the HRH supportive supervision were followed up during the Municipal Supportive Supervision sessions</p>	<p>Fund for WCI have been provided in the 2011/12 CCHP for implementation. They includes purchase of working tools and renovation of offices</p> <p>Team was guided to prepared the localised incentive package for motivating staff in the municipal</p>	<p>New staff were orientated using the traditional procedure of introductions to fellow staff and completion of employment forms</p> <p>Team were oriented on how to conduct effective orientation</p> <p>copy for the package was disseminated to the municipal</p>

MASASI DC						
	Review of the Developed action plan with CHMT and planning team	OPRAS	Staffing trend, Recruitment and retention	HRH Supportive Supervision	Work Climate Initiative	Orientation
	<p>The District has incorporated 17 HRM activities in the 2011/12 CCHP. This is the 17% of the total activities in the action plan compared to 20% in the 2010/11</p> <p>The above trend was due to removal of HRM training in the 2011/12 budget as instructed by MoHSW</p>	<p>All CHMT members were oriented and filled the form properly</p> <p>Team were requested to share the knowledge to lower cadre staff so that all staff in the District be able to implement OPRAS in this financial year</p> <p>CHMT requested BMAF to provide further knowledge on conducting midyear and annual appraisal</p>	<p>Out of 17 approved posts, 18 posted, 16 reported and so far 14 have been retained</p> <p>Ministry posted one more staff who was not in the approved post</p> <p>Staff were oriented on staff tracking tool</p> <p>Localised incentive package will be prepared to attract staff in the District</p>	<p>HRH supportive supervision have been conducted in the normal District supportive supervision sessions</p> <p>Few components in the HRH supportive supervision were followed up during the Municipal Supportive Supervision sessions. They includes adhering to staff regulations, performance evaluation and Job descriptions</p> <p>CHMT were further oriented on the use of the tool</p>	<p>WCI activities have been incorporated in the 2011/12 CCHP. The budget includes construction of staff houses and purchase of working tools such as protective gears</p> <p>Team was guided to prepared the localised incentive package for motivating staff in the municipal</p>	<p>Some components in the orientation package have been used to orient new staff. They includes introductions to fellow staff members, briefing on the professional and public service ethics</p> <p>Team were oriented on how to conduct effective orientation</p> <p>Soft copy for the package was disseminated to the municipal</p>

NANYUMBU DC						
	Review of the Developed action plan with CHMT and planning team	OPRAS	Staffing trend, Recruitment and retention	HRH Supportive Supervision	Work Climate Initiative	Orientation
	<p>The district has incorporated 21HRM activities in the 2011/12 CCHP. This is 25% of the total activities compared to 30% in the financial year 2010/11</p> <p>The above trend was due to removal of HRM training in the 2011/12 budget as instructed by MoHSW</p> <p>But some activities will be implemented through on job training that do not require funding such orientation, OPRAS etc</p>	<p>All CHMT members managed to fill the forms after clarifications was provided on how to fill agreed objectives, target and performance criteria in the forms</p> <p>Requested to have sessions with heads of facilities and Dispensary to fill OPRAS forms and cascade the knowledge to lower cadre staff</p>	<p>In the 2010/11, out of 45 approved posts, 36 posted, 24 reported and 21 retained so far</p> <p>The District used telephone to track staff who have been posted</p> <p>Requested BMAF to support more staff under Global Fund round 9.</p>	<p>2 visits were conducted and 3 HRM activities were supported. This includes rules and regulations for the public services, OPRAS and staff orientation</p> <p>Since the HRM supportive supervision tool seemed to be tool long, – it was advised to select few areas on each session</p> <p>District have no fund to support the standalone HRH supportive supervision as the time set for the normal supportive supervision is not enough to cover all the tools</p>	<p>There are some WCI activities in the approved CCHP such as budget for construction of staff houses , working tools such as gloves, furniture and renovation of staff houses</p>	<p>Some components in the orientation package has been used to orient new staff. They include briefings on the staff rules and regulations, ethics, job descriptions and introduction to fellow staff and surroundings</p> <p>Teams were trained on all components of the orientation package</p>

KILWA DC						
	Review of the Developed action plan with CHMT and planning team	OPRAS	Staffing trend, Recruitment and retention	HRH Supportive Supervision	Work Climate Initiative	Orientation
	<p>The district has incorporated 11HRM activities in the 2011/12 CCHP. The inclusion is 13.2 % of the total budget</p> <p>Funds are not enough to cover all HRM activities</p> <p>Budget guideline offered in the year 2011/2012 discouraged training activities</p> <p>When changes are to be made in submitted CCHP, only few are involved in determining activity priorities</p>	<p>All CHMT members managed to fill the forms after guidance from the coaching team</p> <p>Requested to have sessions with heads of facilities and Dispensary to fill OPRAS forms and cascade the knowledge to lower cadre staff</p>	<p>Posted number nearly matches approved posts; but significant numbers of those who reported and retained are Medical Attendants. Out of 27 reported employees, 20 were Medical Attendants and 7 other posts</p> <p>In the year 2010/2011 the Retention ability in KILWA DC has been 59% of those reported</p> <p>Majority of employees who reported are Medical Attendants and so there are still problems in professional posts</p>	<p>4 visits were conducted and 4 HRM activities were supported. The components includes: task allocation, job description, Incentives and Planning for facility activities</p> <p>Report for the visits are available</p> <p>Team were taken through the HRM supportive supervision tools as some of them didn't attend the training</p>	<p>WCI activities have been budgeted on th 2011/12 CCHP. They includes staff equipments such as protective gears, procurement of furniture and renovation of staff houses</p> <p>CHMTs were oriented on various WCI initiaves and how they improve retention and productivity</p> <p>More activitie will be incorporated on the 2012/13 CCHP</p>	<p>Orientation of staff is limited to introduction to fellow staff and overview of professional ethics and rules and regulation in the public service</p> <p>Teams were trained on all components of the orientation package as majority who attended training have been transferred to other districts or retired</p>

RUANGWA DC						
	Review of the Developed action plan with CHMT and planning team	OPRAS	Staffing trend, Recruitment and retention	HRH Supportive Supervision	Work Climate Initiative	Orientation
	<p>The District has incorporated 8 HRM activities in the 2011/12 CCHP which is 8.8% of the total budget compared to 7.6 percent in the 2010/11</p> <p>The low pace on the inclusion of the HRM activities was due to removal of HRM training in the 2011/12 budget as instructed by MoHSW</p>	<p>All CHMT members were oriented and filled the form properly</p> <p>CHMT requested BMAF to provide further knowledge on conducting midyear and annual appraisal</p>	<p>52% (12) of posted staff reported and 92%(11) were retained</p> <p>Posted staff is greater than requested ones</p> <p>High rate of retention is associated with the fact that a good number were Medical Attendant who historically are not troublesome</p>	<p>HRH supportive supervision have been conducted in the normal District supportive supervision sessions</p> <p>Few components in the HRH supportive supervision were followed up. They includes availability of the job descriptions, OPRAS and staff welfare issues</p> <p>CHMT were further oriented on the use of the tool</p>	<p>Funds have been provided in the CCHP for implementation of the WCI activities. They includes provision of staff protective gears, uniforms, renovation of offices and construction of staff houses</p> <p>Team was guided to incorporate other WCI activities in the CCHP</p>	<p>New staff were oriented through a traditional system of introductions, filling the forms and</p> <p>Team were oriented on how to conduct effective orientation through the orientation package</p> <p>Soft copy for the package was disseminated to the municipal</p>

LINDI MC						
	Review of the Developed action plan with CHMT and planning team	OPRAS	Staffing trend, Recruitment and retention	HRH Supportive Supervision	Work Climate Initiative	Orientation
	<p>The district has incorporated 7HRM activities in the 2011/12 CCHP which is the 4% of the total budget compared to 3% on the year 2010/11</p> <p>Funds are not enough to cover all HRM activities</p> <p>Budget guideline offered in the year 2011/2012 discouraged training activities</p>	<p>Significant improvement is noted on filling OPRAS forms to all levels . 8 members of CHMTs were able to set objectives, targets and performance criteria in the OPRAS form</p> <p>Copies of the filled forms were collected for further scrutiny</p> <p>Requested to have sessions with heads of facilities and Dispensary to fill OPRAS forms and cascade the knowledge to lower cadre staff</p>	<p>10 staff were approved all were posted. 5 staff (50%) reported and Retention in respective year was 100%</p>	<p>No supportive supervision on HRH was conducted during the reporting period</p> <p>Knowledge on the HRH supportive supervision was provided to the teams</p> <p>District have no fund to support the stand alone HRH supportive supervision</p>	<p>WCI activities have been budgeted on the 2011/12 CCHP. They include procurement fo staff equipment, furniture and renovation of staff offices</p> <p>CHMTs were oriented on various WCI initiatives and how they improve retention and productivity</p> <p>More activities will be incorporated on the 2012/13 CCHP</p>	<p>New recruits have been oriented with few components on the orientation package adhered to. They includes planning for staff houses, induction from mentors and provision of job descriptions</p> <p>Teams were trained on all components of the orientation package</p> <p>Orientation plan will be prepared in compliance with the orientation package</p>

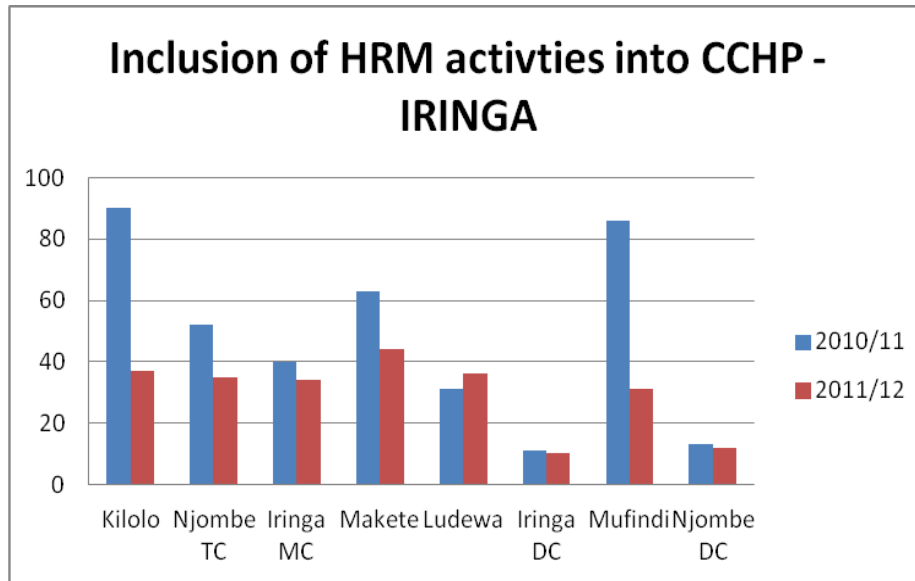
LIWALE DC						
	Review of the Developed action plan with CHMT and planning team	OPRAS	Staffing trend, Recruitment and retention	HRH Supportive Supervision	Work Climate Initiative	Orientation
	<p>The district has incorporated 14 HRM activities in the 2011/12 CCHP compared to 20 in the previous budget</p> <p>The main reason for the drop was the Budget guideline offered in the year 2011/2012 discouraged training activities</p>	<p>Significant improvement is noted on filling OPRAS forms to all levels</p> <p>6 CHMT members who were at the office for the time being managed to fill the forms after guidance from the coaching team. Copies of the filled forms were collected for further scrutiny</p> <p>Requested BMAF to provide further guidance on the midyear review and annual appraisal</p>	<p>Number of approved post was 29, while staff who reported was 11 and Retention in respective year was 100% the District provided various incentives such as transport to the respective health facility, bed and its materials, loan and advance salary in case monthly salary delay</p>	<p>No supportive supervision on HRH was conducted during the reporting period</p> <p>Knowledge on the HRH supportive supervision was provided to the teams</p>	<p>CHMTs were oriented on various WCI initiatives and how they improve retention and productivity</p> <p>More activities will be incorporated on the 2012/13 CCHP</p>	<p>New staff have been oriented through introduction to fellow staff, oriented on public service regulations and induction from respective mentor assigned</p> <p>Teams were trained on all components of the orientation package</p> <p>Orientation plan will be prepared in compliance with the orientation package</p>



LINDI DC						
	<b>Review of the Developed action plan with CHMT and planning team</b>	<b>OPRAS</b>	<b>Staffing trend, Recruitment and retention</b>	<b>HRH Supportive Supervision</b>	<b>Work Climate Initiative</b>	<b>Orientation</b>
	<p>The district has incorporated 13 HRM activities in the 2011/12 CCHP compared to 25 in the 2010/11. This is the 13.5% compared to 24.4% in the 2010/11</p> <p>The decline was due to Budget guideline offered in the year 2011/2012 discouraged training activities</p>	<p>All CHMT members managed to fill the forms after guidance from the coaching team</p> <p>Requested to have sessions with heads of facilities and Dispensary to fill OPRAS forms and cascade the knowledge to lower cadre staff</p>	<p>Number of approved post was 31, while staff who reported was 19 and Retention in respective year was 100%.</p> <p>The district provide staff loan to new recruit and households when transferred to the interior facilities. Advance salary is provided in case a monthly salary delays</p>	<p>HR supportive supervisions were conducted in the routine districts supportive supervision sessions.</p> <p>HRM activities supported includes OPRAS, rules and regulations in the public service and staff welfare</p> <p>Reports for Supportive supervision were made available to the team for reference</p>	<p>WCI activities have been budgeted on th 2011/12 CCHP. They includes renovations of office and staff houses</p> <p>CHMTs were oriented on various WCI initiatives and how they improve retention and productivity</p>	<p>Teams were trained on all components of the orientation package</p> <p>CHMT requested to prepare orientation plan for new staff as per approved posts for 2011/12 permit</p>

Nachingwea						
	Review of the Developed action plan with CHMT and planning team	OPRAS	Staffing trend, Recruitment and retention	HRH Supportive Supervision	Work Climate Initiative	Orientation
	<p>The district has incorporated 21 HRM activities in the 2011/12 CCHP compared to 41 in the 2010/11. This is the 13.5% compared to 24.4% in the 2010/11</p> <p>The decline was due to Budget guideline offered in the year 2011/2012 discouraged training activities</p>	<p>5 CHMT members who were present during the coaching visit managed to fill the forms after guidance from the coaching team</p> <p>Requested to have sessions with heads of facilities and Dispensary to fill OPRAS forms and cascade the knowledge to lower cadre staff</p>	<p>Number of approved post was 41, posted 49 who reported were 21 and 19 have been retain so for</p> <p>The district provide staff loan to new recruit and households when transferred to the interior facilities. Advance salary is provided in case a monthly salary delays</p>	<p>HR supportive supervisions were conducted in the routine districts supportive supervision sessions.</p> <p>HRM activities supported includes rules and regulations in the public service and staff welfare</p> <p>Reports for Supportive supervision were made available to the team for reference</p>	<p>WCI activities have been budgeted on th 2011/12 CCHP. They includes purchase of protective gears and renovation of offices</p> <p>CHMTs were oriented on various WCI initiatives and how they improve retention and productivity</p>	<p>Orientation for new staff is conducted though reviewing staff rules, completion of relevant forms and induction on the respective department</p> <p>Teams were trained on all components of the orientation package</p> <p>CHMT requested to prepare orientation plan for new staff as per approved posts for 2011/12 permit</p>

Fig .1



Fig; 1

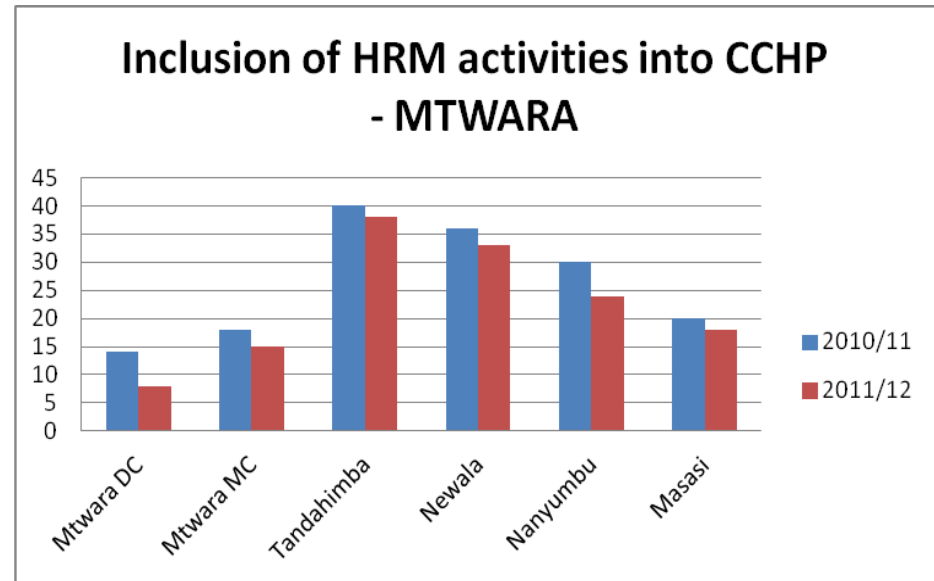


Fig 1

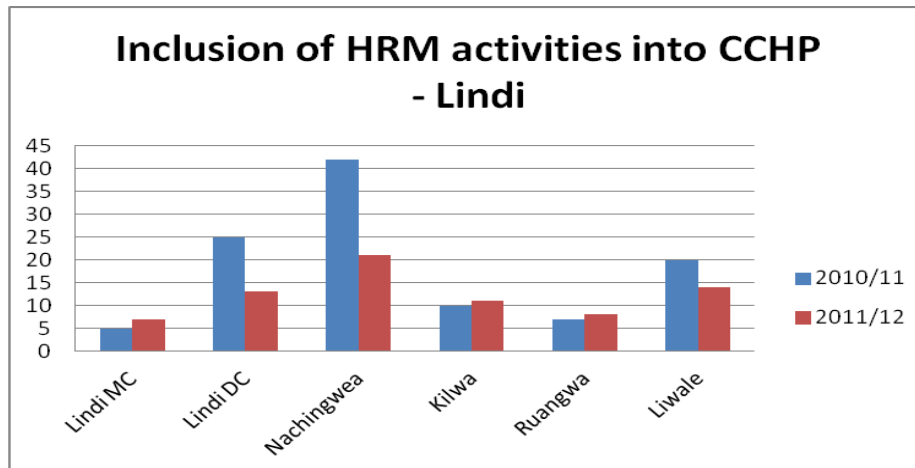


Fig: 2

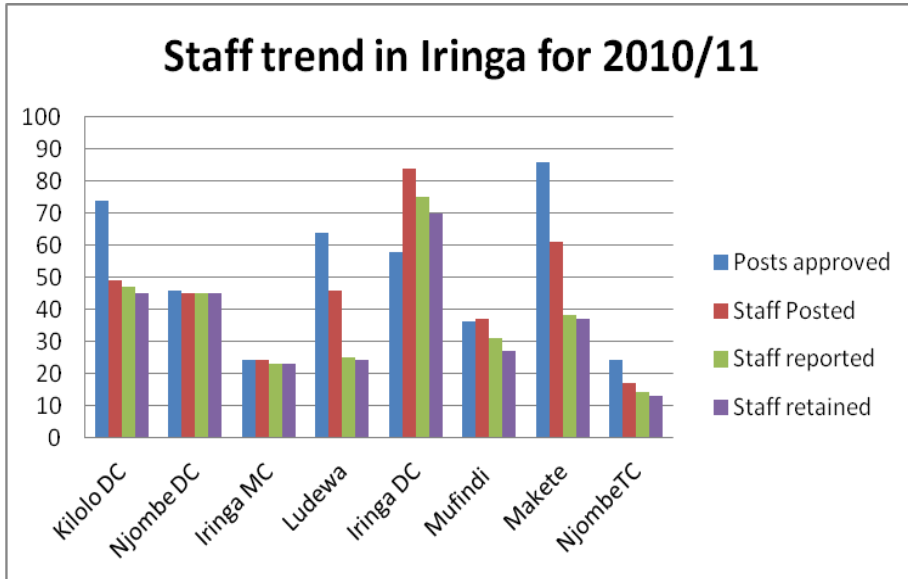


Fig: 2

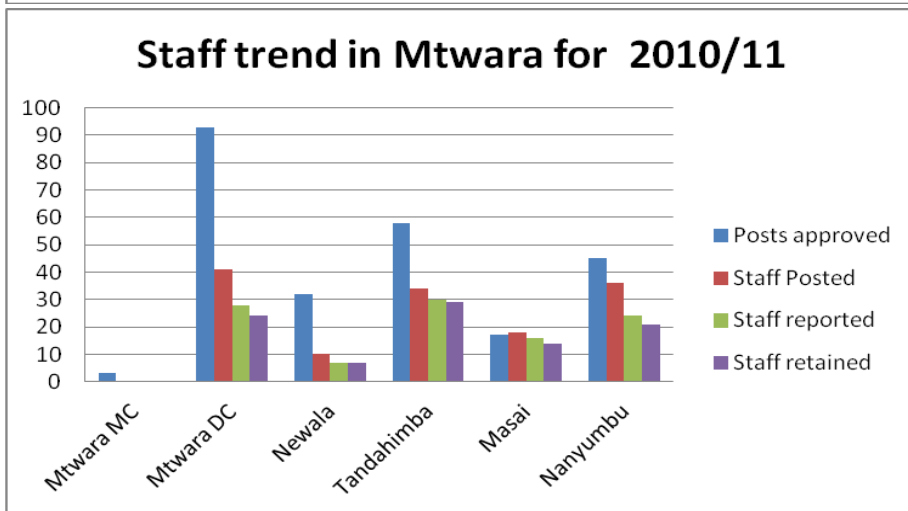
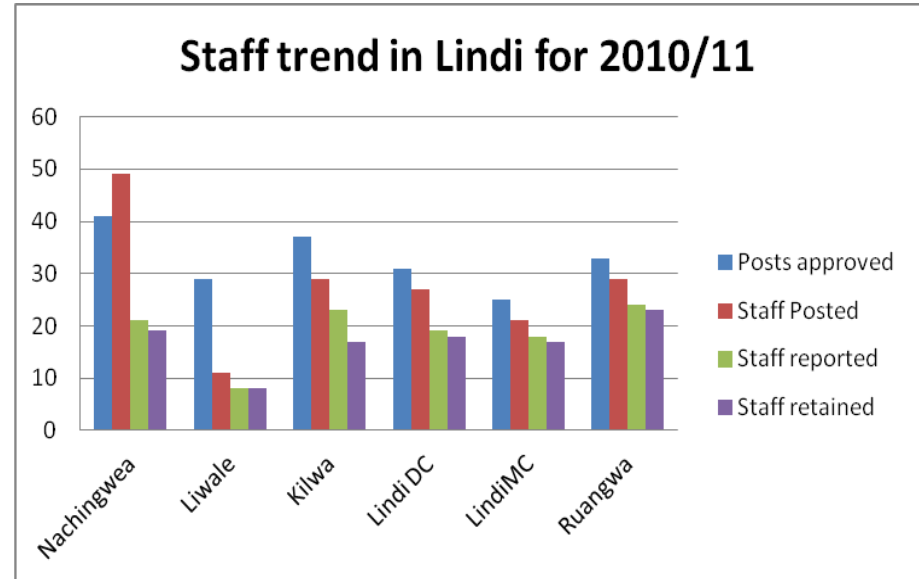


Fig :3

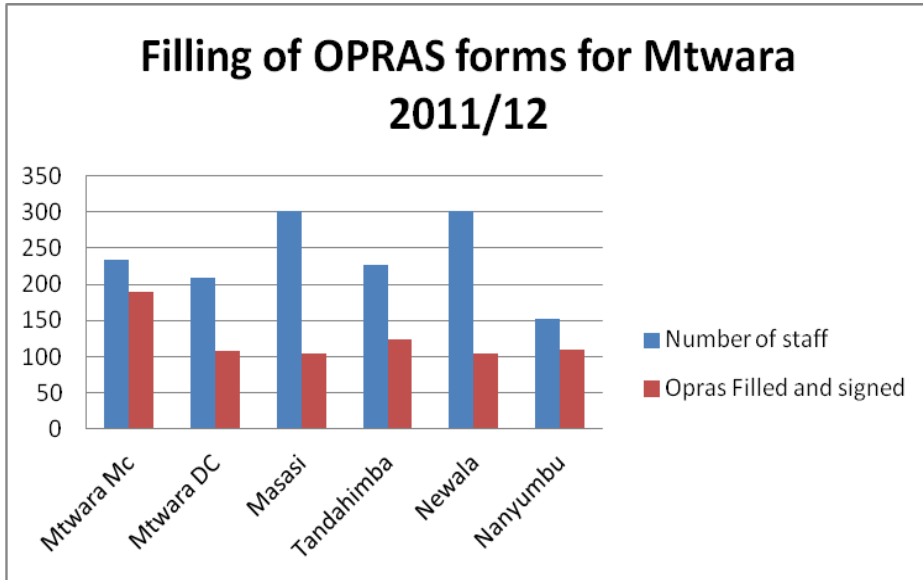
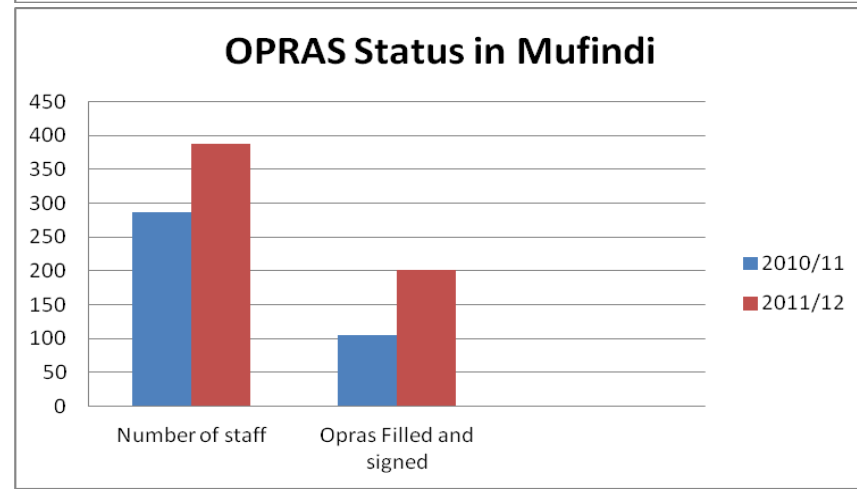
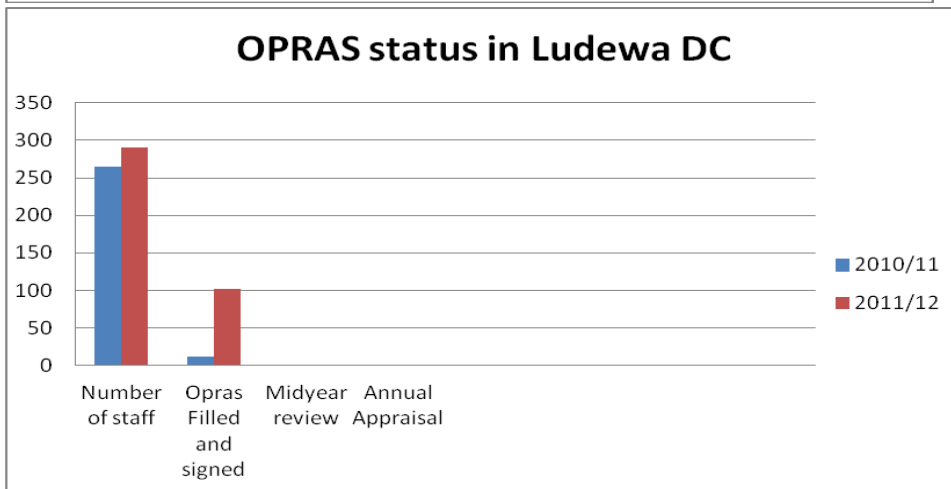
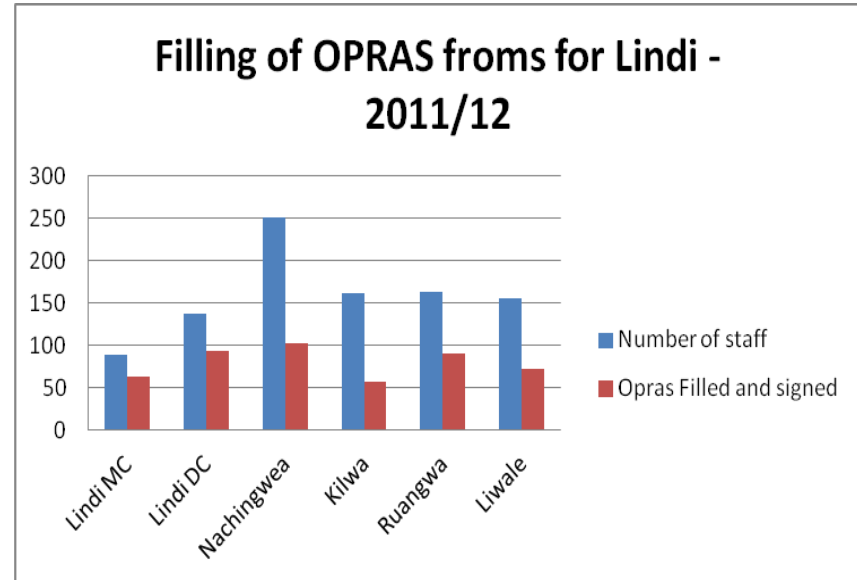


Fig: 3





**Team in Njombe DC coached to fill OPRAS forms**



***View of the construction of patient waiting bay in Kilolo H/C***



Mufindi CHMT during coaching and mentoring session



Mufindi CHMT during coaching and mentoring session

**HUMAN RESOURCES MANAGEMENT DISTRICT STRENGTHENING TRAINING**

**COACHING AND MENTORING GUIDE**

**Dates of the visit** .....

**District:** .....

**Teams:** I.....

II.....

III. ....

**Part I:**

**Introduction & familiarization**

- i. Courtesy visit to the office of the DED and DMO.
- ii. Let the District select the comfortable place for coaching session for the entire team.
- iii. Let the leader of the district team lead the introduction session and invite the coaching team for the session.
- iv. When you meet the team, greet them enthusiastically then explain the purpose of your visit, referring to the letter sent to them two weeks ago, express your trust that they have prepared themselves for the meeting with all references as requested by the letter.
- v. Request the district leader to elect the leadership of the session (chairman and secretary)



**Part II:**

**FOCUS GROUP DISCUSSIONS WITH CHMT** (include members who participated in HRM toolkit Training & any other members who can be important)

**Guiding Tips for this section.**

Find out how the team has been doing. Specifically enquire about progress made on their action plans. Ask questions to help the team think through what they are doing and what they need to improve. Praise the team for progress made. Encourage them regarding challenges they may be having. Identify any areas the team may require support from the district/facility administration or from BMAF. Enquire on the extent to which they have integrated their action plans with facility and district plans such as CCHP.

Use the following matrix to guide and document your discussion, allow comprehensive but focused discussion as per tips provided above.

**Focus area 1: HRH action plan incorporated into CCHP.**

**Aim: –Enhance effective implementation of HRH activities.**

Area of follow up	Updates/Progress Be as specific as possible  Percentage increase of HRM action plans from 2010/11 to 2011/12 (by numbers and percentage)	Discussion & support guide & Evidence  Be as specific as possible; make photocopies of the evidence to verify	Challenges	Recommendations & Way forward												
Extent of incorporation of the HRH action plan into CCHP	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;"></td> <td style="text-align: center; width: 10%;">No</td> <td style="text-align: center; width: 10%;">%</td> <td style="width: 20%;"></td> </tr> <tr> <td>HRM activities for 2010/11</td> <td style="text-align: center;"><input style="width: 40px; height: 20px;" type="text"/></td> <td style="text-align: center;"><input style="width: 40px; height: 20px;" type="text"/></td> <td></td> </tr> <tr> <td>HRM activities for 2011/12</td> <td style="text-align: center;"><input style="width: 40px; height: 20px;" type="text"/></td> <td style="text-align: center;"><input style="width: 40px; height: 20px;" type="text"/></td> <td></td> </tr> </table>		No	%		HRM activities for 2010/11	<input style="width: 40px; height: 20px;" type="text"/>	<input style="width: 40px; height: 20px;" type="text"/>		HRM activities for 2011/12	<input style="width: 40px; height: 20px;" type="text"/>	<input style="width: 40px; height: 20px;" type="text"/>		Obtain copies of CCHP		
	No	%														
HRM activities for 2010/11	<input style="width: 40px; height: 20px;" type="text"/>	<input style="width: 40px; height: 20px;" type="text"/>														
HRM activities for 2011/12	<input style="width: 40px; height: 20px;" type="text"/>	<input style="width: 40px; height: 20px;" type="text"/>														

**Focus 2: HRH Action Plan funded by the Government and other stakeholders**

**Aim: Mobilize resources from the Government or within the district (financing) for effective implementation of HRH activities**

Area of Follow up	Updates/Progress	Discussion & support guide & Evidence ( if yes)	Challenges	Recommendation/Way forward																		
<p>1. Funding of HRM activities from Government and other stakeholders (apart from PE)</p>	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 20%;"></th> <th style="width: 20%; text-align: center;">2010/2011</th> <th style="width: 20%; text-align: center;">2011/12</th> </tr> </thead> <tbody> <tr> <td>Total amount of fund</td> <td style="text-align: center;"><input type="text"/></td> <td style="text-align: center;"><input type="text"/></td> </tr> <tr> <td>Govt - SDL</td> <td style="text-align: center;"><input type="text"/></td> <td style="text-align: center;"><input type="text"/></td> </tr> <tr> <td>Own source</td> <td style="text-align: center;"><input type="text"/></td> <td style="text-align: center;"><input type="text"/></td> </tr> <tr> <td>.....</td> <td style="text-align: center;"><input type="text"/></td> <td style="text-align: center;"><input type="text"/></td> </tr> <tr> <td>.....</td> <td style="text-align: center;"><input type="text"/></td> <td style="text-align: center;"><input type="text"/></td> </tr> </tbody> </table>		2010/2011	2011/12	Total amount of fund	<input type="text"/>	<input type="text"/>	Govt - SDL	<input type="text"/>	<input type="text"/>	Own source	<input type="text"/>	<input type="text"/>	.....	<input type="text"/>	<input type="text"/>	.....	<input type="text"/>	<input type="text"/>	<ul style="list-style-type: none"> <li>Obtain the list of the sources of fund by name, amount</li> </ul>		
	2010/2011	2011/12																				
Total amount of fund	<input type="text"/>	<input type="text"/>																				
Govt - SDL	<input type="text"/>	<input type="text"/>																				
Own source	<input type="text"/>	<input type="text"/>																				
.....	<input type="text"/>	<input type="text"/>																				
.....	<input type="text"/>	<input type="text"/>																				
<p>2. HRH priorities for the following year</p>																						

**Part III:**

**Selected HRM Baseline information Status, Support Guide and Way forwards**

**(a.) Trace the district staffing trends for as from 2009 – 2011 , observe and document the numbers, pulling and pushing factors for the trend**

Area of Follow up	2010/2011	2011/2012	Challenges, discussion & support guide	Recommendations/Way forward
Staffing status at the Hospital, Health Center & Dispensaries	Hospital Level <b>Available Requested</b>	Hospital Level <b>Available Requested</b>	<ul style="list-style-type: none"> <li>Assess the trend,</li> <li>Obtain associated challenges</li> <li>Collectively develop strategies to address the challenging with alignment to the action plans and other interventions within &amp; without the project.</li> </ul>	
	MD <input type="text"/> <input type="text"/>	MD <input type="text"/> <input type="text"/>		
	H.S <input type="text"/> <input type="text"/>	H.S <input type="text"/> <input type="text"/>		
	SWO <input type="text"/> <input type="text"/>	SWO <input type="text"/> <input type="text"/>		
	NO <input type="text"/> <input type="text"/>	NO <input type="text"/> <input type="text"/>		
	Lab Tech <input type="text"/> <input type="text"/>	Lab Tech <input type="text"/> <input type="text"/>		
	Pharm Tech <input type="text"/> <input type="text"/>	Pharm Tech <input type="text"/> <input type="text"/>		
	Health Center <b>Available Requested</b>	Health Center <b>Available Requested</b>		
	CO <input type="text"/> <input type="text"/>	CO <input type="text"/> <input type="text"/>		
	Nurse <input type="text"/> <input type="text"/>	Nurse <input type="text"/> <input type="text"/>		
	Pharm Tech <input type="text"/> <input type="text"/>	Pharm Tech <input type="text"/> <input type="text"/>		

	<b>Dispensary Available Requested</b> CO <input type="text"/> <input type="text"/> Nurse <input type="text"/> <input type="text"/>	<b>Dispensary Available Requested</b> CO <input type="text"/> <input type="text"/> Nurse <input type="text"/> <input type="text"/>		
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(b) Request for the updates/status on the staff that were posted and those reported as from 2009 – 2011(time of visit),

Area of follow up	Current 2010/2011 (Approved establishment Vs reported )	Challenges ,discussion & support guide	Recommendations/Way forward
Tracking of the posted Health workers	Number of approved posts <input type="text"/> Number of those posted <input type="text"/> Number of reported HWs <input type="text"/> Number of staff retained <input type="text"/>	<ul style="list-style-type: none"> <li>Assess the status</li> <li>Obtain the reasons of the trend</li> </ul>	
Do you use the staff tracking tool developed by MoHSW?	<ul style="list-style-type: none"> <li>Yes                                <input type="text"/></li> <li>No                                   <input type="text"/></li> </ul> If no, what method or tool do you use to track posted	<ul style="list-style-type: none"> <li></li> </ul>	

	staff.....		
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( c. ) status/Updates of OPRAS obtain the forms, assess the comprehensiveness of the forma and the process obtain associated challenges and advice accordingly.

Area of follow up	Baseline 2010/2011	Current Status 2011/2012	Discussion & support guide & Evidence ( if any)	Recommendation/Way forward
Functional OPRAS	Total number of staff <input data-bbox="801 632 913 679" type="text"/> Number of ORAS forms completely filled & signed <input data-bbox="801 727 913 775" type="text"/> Number of staff conducted mid- year reviews <input data-bbox="801 855 913 903" type="text"/> Number of staff with annual performance appraisal reports/feedback <input data-bbox="801 951 913 999" type="text"/>	Total number of staff <input data-bbox="1249 632 1361 679" type="text"/> Number of ORAS forms completely filled & signed <input data-bbox="1249 727 1361 775" type="text"/>	<ul style="list-style-type: none"> <li>• Obtain the forms/reports &amp; Assess the trend,</li> <li>• Guide the team on how to fill the form for the 2011/12</li> </ul>	

( D ) : Trace the supportive supervision trends for the year 2010/2011, request for the supportive supervision reports and assess the inclusion HR components and request for any updates on the issues raised through the reports.

Area of follow up	Current status 2010/2011	Discussion & support guide & Evidence	Recommendations/Way forward.
HRM/H supportive supervision	Number of visits made <input type="text"/> Number of HRM issues supported <input type="text"/> Mention 3 main HRM issues/challenges from the supportive supervision reports that were further resolved within 12 months time of visit i..... ii..... iii.....	<ul style="list-style-type: none"> <li>• Obtain the reports &amp; Assess the trend,</li> <li>• Obtain associated challenges</li> <li>• Collectively develop strategies to address the challenges with alignment to the action plans and other interventions within &amp; without the project</li> </ul>	